LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

2200 St. Marys Ave Lincoln, NE 68502-3785 (402) 441-8000

NON TRANSFERABLE

PERMIT

Permit
SEWAGE SYSTEM REPAIR

No. 93390035601

Issued 11/09/93
Expires 05/09/94
Revenue Code 18754

Establishment
SINTEK SERVICE
T12N R6E SEC 32
WILLARD ESTATES 2ND BLK 1 LOT 3

FEES: $50.00

TOTAL $50.00

Permittee
SINTEK SERVICE
6710 N 7 ST
LINCOLN NE 68531-8935

Issued By M. Jane Ford
Health Director

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW
"POST IN A PROMINENT PLACE"

FORM HD-41(73) APPLICATION FOR PERMIT TO ALTER, EXTEND OR REPAIR INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 [ ]
County Resolution No. 2832 [X]

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Ave.
Lincoln, Nebraska 68502 (Phone: 471-7800)

FILE NO._____

TO: Division of Environmental Health
Lincoln-Lancaster County Health Dept.

DATE: 11-9-93

The undersigned hereby applies for a permit to ALTER [ ], EXTEND [ ], or REPAIR [X] an existing Individual Sewage Disposal System, in conformance with appropriate Ordinance or Resolution, as described in this application and drawings attached hereto.

1. Legal description of property: Twp. 12N ; Range 6E ; Section 32 ;
Block 1 ; Lot 3 ; Addition _____
Street Address _____

2. Property Use: Residential _____ [ ]; Commercial _____ [ ]
No. Bedrooms _____ Describe _____
Other Use [ ]
Describe _____

3. Type of existing Individual Sewage Disposal System: Septic Tank [ ]; Other [ ]

4. Description of proposed alteration, extension or repair: Added 40 ft of lateral, perforated, to existing system

5. Work to be done by: Owner [ ] ; or Contractor [X], Sintek
Contractor's Name

6. Estimated cost of project:

a. Materials	$
b. Labor	$
c. Other	$
TOTAL	$

Cov Pam Miller

Sintek Service
Signature of Applicant (owner or lessee)

6710 N. 27th
Address Lincoln, NE 68521

(Do not write below this line)

REVIEWING ACTION

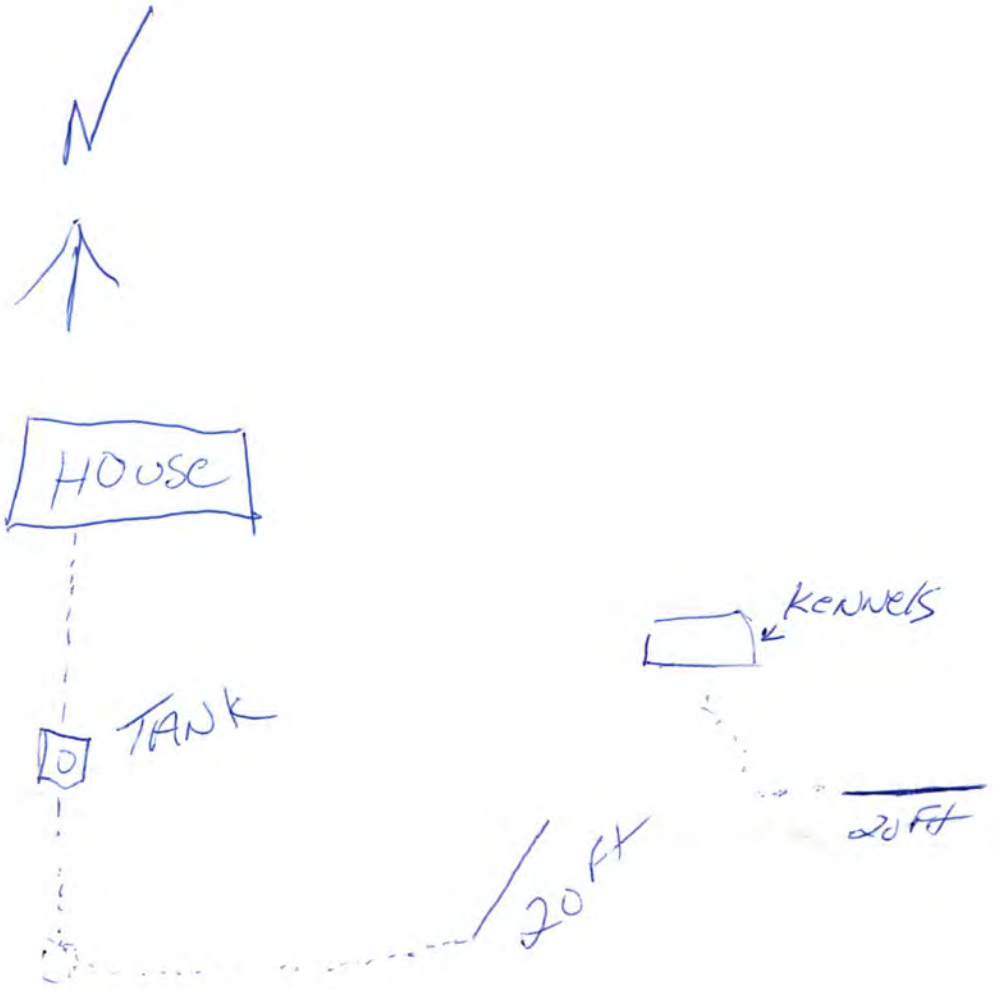
1. Date Rec'd: 11-9-93
Filing Fee: $ 150.00

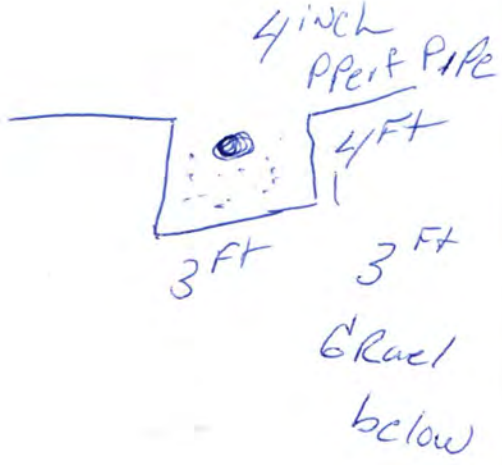
2. Site Visits:
Date: 11-9-93 by: mm
Date: ~~Rec~~ - by: _____
Date: _____ by: _____

3. Date: Approved [X]; Disapproved [ ]
by: Ron Magnant

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: _____ by: _____

* NO information on how dog kennel lateral ties into this system.


N
HOUSE
TANK
KENNELS
20 Ft
20 FT


4 inch
PVC PIPE
4 FT
3 FT
3 FT
6 Rael
below

NEBRASKA — SHEET NUMBER 8

